COMPLAINT BACKLOG REPORT

November 1999

Bureau of Health Systems
Michigan Department of Consumer & Industry Services



Serving Michigan... Serving You

Introduction

This report is produced in response to Section 325 of PA 122 of 1999 which provides, "The department shall report by November 1, 1999 to the legislature and the fiscal agencies the status of the nursing home complaint investigation backlog and any suggested revisions to current statute or promulgated rules that will assist in improving the effectiveness of the nursing home survey and complaint investigation process."

Backlog Project

All backlogged complaints, those over 30 days old, were eliminated by July 1, 1999. In April 1999, the backlog reduction project resulted in the investigation of 480 long term and non long term care complaints. There were 376 nursing home complaints included in that total. The complaint backlog was eliminated by staff working overtime and the assistance of a contractual surveyor designated to handle complaints. The non-backlogged caseload was carried forward under revised procedures to assure timely responses.

Complaint Investigation Timeframes

All complaints received by the Bureau are now investigated within 30 days. The most recent data shows that the 344 complaints and facility incident reports received since September 1, 1999 were investigated within an average 14.3 days of receipt. Complaints involving serious injury, death, alleged abuse or situations of immediate jeopardy are responded to within 24 hours. The processing time for complaint intake has gone from one or more weeks to three days.

The reduction of investigation and processing time is particularly significant because of an increase in the number of complaints received. Complaints have increased each month since July 1999. In September and October, the number of complaints received increased by 19%. This increase is attributable to improved access to the Complaint Intake Unit. Intake staff now supplement the complaint hotline which formerly was the primary means of contact with the Bureau. Staff are now available to answer calls and assist the public with the filing of written complaints. Individuals with verbal complaints are assisted by staff to put the complaint in written form. The two analysts hired in August have been effective in triaging complaints and making the proper referrals.

Program Improvements

As indicated above, a Complaint Intake Unit has been created to assist with the filing of written complaints and, in the case of verbal complaints, to assist in reducing the complaint to writing. The voice capability for the complaint "Hotline" was expanded to allow for weekend and off hours calls to be recorded. A standardized form, "Resident Care Complaint," (see attached sample of form) was designed and was piloted for three months to evaluate it for ease of use and effectiveness. It has proven to be an aid in getting more meaningful and complete information from complainants and will be produced in a carbonless form for use by the public in December 1999.

Two new complaint investigation teams, one in Detroit and one in Lansing, have also been formed to focus specifically on complaint investigations and facility incident reports of abuse, neglect, sexual assaults, or serious injury to nursing home residents. These teams operate separately from the survey teams which routinely monitor facilities.

An additional program improvement is the development of automated caseload reports that will assist Bureau managers in tracking the timely processing, scheduling and investigation of complaints. Additional complaint tracking reports are being developed to further reduce response timeframes.

New Staff

Interviews are being conducted to fill the 16 new FTEs authorized by the Legislature for FY 2000. The full benefit of new hires, however, will not be felt until they are fully trained, which may take several months. The Complaint Investigation Team will be appointed in mid-November.

Legislation

Attention should be given to the Department's request for amendment of Sections 20162 and 21799 of the Public Health Code. In 1998, the Department initiated major reforms in nursing home enforcement, including the use of state approved facility managers and advisors, paid for by facilities, to assist homes that have serious compliance problems. Questions, however, have been raised about the Department's authority to require temporary managers and advisors. The recommended statutory changes would clarify this authority.

At this time, we do not recommend any revisions to State statutes or promulgated rules for the nursing home survey or the complaint process. These protocols are largely controlled by federal regulation.

Conclusion

The Bureau is meeting the challenge of timely investigation of complaint reports. The Complaint Intake Unit is meeting its requirement to process incoming complaints and referral for investigation within the three days allowed. Staff surveyors are investigating complaints within the 30 days. There is no complaint backlog. New program and data system changes will further reduce complaint timeframes as they are implemented.

Michigan Department of Consumer & Industry Services

Bureau of Health Systems - Division of Enforcement, Evaluation and Training Complaint Intake Unit - P.O. Box 30664 - Lansing, MI 48909

Number: (517) 241-2635 - Complaint Hotline: 1-800-882-6006

RESIDENT CARE COMPLAINT

Authority: MCL 333.21799a Completion of this form is voluntary.

Instructions: Print legibly or type information. Sign at bottom. Complete all sections of this form. Return form to the address above. Retain canary copy for your records.

To For assistance please call: Complaint Intake Unit at (517) 334-6990.

| | Compleied Filed Against: |
|---|--|
| Information About You: | Complaint Filed Against: |
| Your Name | Facility Name |
| Street Address | Facility Street Address |
| City | City |
| State Zip | State Zip |
| Telephone No. Home () | Telephone No. () Contact Person's Name: |
| Daytime/Work () | Contact i Cison's ivanie. |
| RESIDENT/PATIENT NAME: | |
| formation About Your Complaint: | |
| WHAT is your complaint about? (Attach additional sheets if necessary. No. of pages attached:) | |
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| WHEN did the problem or incident occur? Date: Is this an ongoing problem? Yes For | how long? No No |
| WHERE did the problem or incident occur? | |
| | |
| WHO ELSE KNOWS about the problem or incident? (Include titles of facility staff if you know them.) | |
| Have you contacted the facility about your complaint? Yes Who? No [| |
| there a lawsuit pending about this same matter? Yes Attorney's name: No | |
| Have you contacted the Attorney General, the police or any other agency about this same matter? Yes Name of agency/police dept: No No No No No No No No | |
| Yes Name of agency/police dept: | |
| Your Signature: Date Signed: | |
| BHS-EET-301 (MO9) | |